

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>DO</i>	<i>698101</i>	<i>1/4</i>
O.I.P.E. CLASSIFIER		<i>6</i>	<i>5-22-90</i>
FORMALITY REVIEW	<i>D. B. M.</i>	<i>65373</i>	<i>08/04/00</i>
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ Rejected  
 = Allowed  
 - (Through numeral) Canceled  
 + Restricted  
 N Non-elected  
 I Interference  
 A Appeal  
 O Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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Best Available Copy